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**TO:** U.S. Patent and Trademark Office

**TELEFAX #:** (571) 273-8300

**ATTENTION:** Examiner Huynh, C.

**DATE:** December 7, 2005

**TIME:** 5:15 p.m.

**NUMBER OF PAGES:** 11 total page(s) (including this cover)

**FROM:** Rochelle Lieberman, Esq.

**RE:** Serial No. 10/040,129

**DESCRIPTION:** Response to Non-Final Office Action

**COMMENT:**

Voice Confirmation Required:

☐

Yes

☒

No

Original to Follow by Mail/Courier:

☐

Yes

☒

No

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**PATENT**

Atty. Docket No.: BEA920010029US1

**CERTIFICATION OF TRANSMISSION**

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Office, Fax No. (571) 273-8300 on December 7, 2005.

12/7/2005

Date of Deposit

Rochelle Lieberman

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Carpenter

SERIAL NO.: 10/040,129

FILING DATE: January 2, 2002

FOR: **Method For Dynamically  
Generating Reference  
Identifiers In Structured  
Information**

Group Art Unit: 2178

Examiner: Huynh, C.

**AMENDMENT TRANSMITTAL LETTER**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Enclosed is an amendment in the above-identified patent application.

☐ \_\_\_ verified statement(s) claiming small entity status☐ [ ] are also enclosed ☐ [ ] was submitted previously.☐ [ ] A Petition for Extension of Time is also enclosed.☐ [ ] An Associate Power of Attorney is also enclosed.☒ [x] No additional fee is required.☐ [ ] An additional fee is required, and is calculated as shown below:

FEE CALCULATION TABLE					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDTL FEE
Total Claims	21	MINUS 21 =	0	x \$50 =	\$0
Independent Claims	4	MINUS 4 =	0	x \$200 =	\$0
If Amendment adds multiple dependent claims, add \$220.00					
Patent Extension Fee Under 37 C.F.R. §1.136(a) for ___ Months					N/A
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
<b>TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT</b>					<b>\$0</b>

## Deposit Account Authorization:

- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 501336. A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. §1.16.
- ☒ Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

By: 

Rochelle Lieberman  
 Registration No. 39,276  
 Attorney for Applicant

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Date: December 7, 2005

FEE CALCULATION TABLE					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	21	MINUS 21 =	0	x \$50 =	\$0
Independent Claims	4	MINUS 4 =	0	x \$200 =	\$0
If Amendment adds multiple dependent claims, add \$220.00					
Patent Extension Fee Under 37 C.F.R. §1.136(a) for ___ Months					N/A
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
<b>TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT</b>					<b>\$0</b>

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- ☒ Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

By: \_\_\_\_\_

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**PATENT****Attorney Docket No.: BEA920010029US1****CERTIFICATION OF TRANSMISSION**

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Examiner: Huynh, C.

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Response to Non-Final Office Action**

Dear Sir:

In response to the Non-Final Office Action dated September 7, 2005, Applicant respectfully requests reconsideration of the outstanding rejection(s) of the claims in view of the amendments and remarks that follow.